## INDIVIDUAL OR PARTNERSHIP ACKNOWLEDGMENT Appendix A -- Illustration F

STATE OF	)		
COUNTY OF_	)		
On this	day of,	, before me	the
undersigned off	ficer, personally appeared	to me	personally known and
acknowledged t	e same person(s) whose name(s) the execution thereof for the us	es and purposes therein set f	forth.
(Notarial Sea	al)	Notary Public  My commission expir	es: